



NEW CITY CHURCH

INTERNSHIP PROGRAM APPLICATION

APPLICANT INFORMATION

NAME: _____ DATE: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

EDUCATIONAL BACKGROUND

HIGH SCHOOL: _____ CITY & STATE: _____

YEAR OF GRADUATION: _____

COLLEGE: _____ DATES ATTENDED: _____

YEAR OF GRADUATION: _____ AREA OF STUDY: _____

WHAT ARE YOUR CAREER ASPIRATIONS?:

INTERNSHIP AREA OF INTEREST

WHICH MINISTRIES ARE YOU INTERESTED IN? (check all that apply)

ADULT DISCIPLESHIP (MEN'S, WOMEN'S, CLASSES)

COMMUNITY GROUPS

HOST TEAM

JUSTICE & CARE / MISSIONS

KIDS

STUDENTS

WORSHIP & ARTS

CURRENT CHURCH AFFILIATION

NAME OF HOME CHURCH: _____

DENOMINATION: _____ LOCATION (CITY, STATE): _____

DO YOU ATTEND NEW CITY: _____

VOLUNTEER EXPERIENCE

LIST YOUR CURRENT AND PAST VOLUNTEER EXPERIENCES (PLEASE INCLUDE THE DATES):

PERSONAL MINISTRY EXPERIENCES

DO YOU FEEL CALLED TO FULL-TIME MINISTRY? IF SO, PLEASE EXPLAIN.

HOW WOULD YOU DESCRIBE YOUR RELATIONSHIP WITH GOD?

WHAT DO YOU EXPECT TO GAIN FROM THIS EXPERIENCE?
WHY DO YOU WANT TO BE TRAINED AT NEW CITY CHURCH?